

**2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000000107

**Entity Name:** ALL AMERICAN TITLE AFFILIATES, LLLP

**Current Principal Place of Business:**

679 W. LUMSDEN RD  
BRANDON, FL 33511

**Current Mailing Address:**

679 W. LUMSDEN RD  
BRANDON, FL 33511

**FEI Number:** 59-3692587

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LUTHER, SUSAN  
679 W. LUMSDEN RD  
BRANDON, FL 33511 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**General Partner Detail :**

Document # P95000010284  
Name ALL AMERICAN TITLE INSURANCE  
AGENCY, INC.  
Address 679 W. LUMSDEN RD  
City-State-Zip: BRANDON FL 33511

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SUSAN LUTHER

**GENERAL PARTNER**

**04/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date